

POLICY 1210 INSTITUTIONAL SERVICES AND SETTINGS

- 4. Professional services provided by Behavioral Health Independent Billers, who may report/bill services separately from the facility (see definition in Glossary of the Behavioral Health Services Guide). Refer to the Behavioral Health Services Guide for further information on AHCCCS covered behavioral health services and settings.
- 5. Hospice services (refer to Policy 1250 for detailed information regarding components of this service), and
- 6. EPSDT services as specified in Chapter 400, Policy 430 of this Manual.

Institutional settings also include Behavioral Health Level I, Institution for Mental Disease (IMD), and Inpatient Psychiatric Residential Treatment Center. ALTCS Contractors are responsible for ensuring that providers delivering institutional services to members must meet the requirements as specified in this Manual.

Behavioral Health Level I

A behavioral health service facility licensed by ADHS, as defined in A.A.C. 20, to provide a structured treatment setting with 24-hour supervision, on-site medical services and an intensive behavioral health treatment program. These facilities are the highest level of inpatient behavioral health services (other than psychiatric hospitalization). Some Level I facilities are IMDs.

Institution for Mental Disease (IMD)

A Medicare-certified hospital, special hospital for psychiatric care, behavioral health facility or nursing care institution which has more than 16 treatment beds and provides diagnosis, care and specialized treatment services for mental illness or substance abuse for more than 50% of the patients is considered an IMD. ADHS Office of Behavioral Health Licensure-licensed Level I facilities with more than 16 beds are considered IMDs.

Reimbursement for services provided in an IMD to Title XIX persons age 21 through 64 years of age is limited to 30 days per inpatient admission, not to exceed a total of 60 days per contract year. For Title XIX members under age 21 and 65 years of age and older, there is no benefit limitation. A Title XIX member aged 21 through 64 will lose eligibility for covered services if an IMD stay extends beyond 30 days per admission or 60 cumulative days per year (July 1 through June 30). A Title XIX member who is receiving services in an inpatient psychiatric facility considered to be an IMD who turns 21 may continue to receive services until the point in time in which services are no longer required or the member turns age 22, whichever comes first. AHCCCS provider types B6 and 71 are IMDs.



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<u>Inpatient Psychiatric Residential Treatment Center (available to Title XIX members under 21 years of age)</u>

A behavioral health service facility licensed by ADHS. Services must be provided under the direction of a physician and include active treatment implemented as a result of the service plan developed. The service plan must include an integrated program of therapies, activities and experiences designed to meet the treatment objectives for the member. A Title XIX member who turns age 21 while receiving services in an inpatient psychiatric facility considered to be an IMD may continue to receive services until the point in time in which services are no longer required or the member turns age 22, whichever comes first.

Amount, Duration and Scope.

For behavioral health institutional services, each unit of service constitutes a 24-hour day (per diem), and includes:

- 1. Nursing care services, including rehabilitation
- 2. Social services
- 3. Dietary services, including, but not limited to, preparation and administration of special diets
- 4. Recreational therapies and activities
- 5. Overall management and evaluation of the facility's plan of care for the member
- 6. Observation and assessment of the member's changing condition
- 7. Room and board services, including, but not limited to, support services such as food, personal laundry and housekeeping, and
- 8. Nonprescription and stock medicines.





POLICY 1220

FEDERALLY MANDATED PROGRAMS FOR NURSING FACILITIES

In addition, the following services must be available to members residing in an ALTCS institutional setting, but are not included in the service unit:

- 1. Speech, physical and occupational therapies unless required as a part of the per diem for the service unit
- 2. Medical/acute care services as specified in Chapter 300 of this Manual. Medical/acute care services provided to ALTCS Contractor members include all those services provided to acute care Contractor members.
- 3. Professional services provided by behavioral health independent billers, who may report/bill services separately from the facility (see definition in Glossary of the Behavioral Health Services Guide).

Refer to the Behavioral Health Services Guide for further information on AHCCCS covered behavioral health services and settings.